CONVOLUTIONAL NEURAL NETWORKS

What the neural network is: A Convolutional Neural Network (CNNs) is a type of neural network specifically built to handle grid-structured data like images. They are especially effective for tasks involving image analysis and recognition. key components of a convolutional neural network are convolutional layers, pooling layers, activation function, and fully connected layers. It is a type of feedforward neural network that learns to extract features by optimizing filters (also known as kernels). This deep learning architecture has been widely used to analyze and make predictions from various data types, including images, text, and audio. CNNs have become the standard approach for tasks in computer vision and image processing, although newer architectures like transformers have started to replace them in certain applications.

How it works:

- 1. **Input Layer:** The CNN takes an input image, which is often preprocessed to ensure uniformity in size and format.³
- 2. **Convolutional Layer:** This is the core layer where most of the computation occurs.³ It uses a filter (or kernel) to scan the input image, applying a dot product between the filter and the image's pixels.³ As the filter moves (or "convolves") over the image, it produces a feature map, which highlights specific features such as edges, textures, or shapes.³ The filter weights are shared across the entire image, and some of the weights are updated during training.³
- 3. **Hyperparameters:** In the convolutional layer, there are several hyperparameters that affect the output:
 - a. Number of filters determines the depth of the feature map.³
 - b. **Stride** controls how much the filter moves at each step, influencing the size of the output.³
 - c. **Padding** (valid, same, or full) can be applied to handle situations where the filter does not fit perfectly within the input image.³
- 4. **ReLU Activation:** After each convolution operation, a Rectified Linear Unit (ReLU) function is applied to introduce nonlinearity into the model, allowing it to learn more complex patterns.³
- 5. **Additional Convolutional Layers:** If there are multiple convolutional layers, they form a hierarchical structure.³ Earlier layers detect basic features (e.g. edges), while deeper layers combine these features to recognize more complex patterns (e.g. objects or parts of an object, like a bicycle).³
- 6. **Pooling Layer:** This layer reduces the dimensionality of the feature maps to decrease the number of parameters and computation.³ It uses filters without weights, applying functions like max pooling (selects the maximum value in the receptive field) or average pooling (calculates the average value).³ Pooling helps improve efficiency and prevent overfitting.³
- 7. **Fully Connected (FC) Layer:** After the convolutional and pooling layers, the feature maps are flattened and passed into the fully connected layer.³ In this layer, every node is

- connected to every node from the previous layer.³ The FC layer uses an activation function (often softmax) to classify the image, producing a final prediction, such as the probability of the image belonging to a specific class.³
- 8. **Output:** The CNN's final output is a prediction, like identifying the class of the image (e.g. recognizing an object or a pattern).³

How it is used/ Applications:

1. Classification:

- a. CNNs classify lung nodules on CT scans as benign or malignant.⁴
- b. 2D-CNNs classify liver masses using triphasic CT images.⁴
- c. Classify nodules using full 3D spatial information with 3D patches.⁴
- d. Utilize multiphase CT or MRI (e.g. arterial, delayed phases) for better diagnostic performance.⁴

2. Segmentation:

- a. Segment organs (like the uterus or liver) and tumors in MRI/CT images.⁴
- b. Generate probability maps of organ presence and refine using algorithms like graph cut.⁴
- c. Separately segments liver and liver mass for improved efficiency.⁴

3. Detection:

- a. 2D-CNNs (AlexNet, GoogLeNet) used for detecting TB in chest X-rays.⁴
- b. CNN-based CADe systems outperform traditional feature-based detection systems.⁴
- c. Use of radiologist annotations and unsupervised clustering with CNNs (e.g. Faster R-CNN) to detect lesions more accurately.⁴

Challenges/ Any gotchas in using it:

- Lack of Explainability: CNNs are often considered a "black box" because they do not provide a clear explanation of how they arrive at their decisions, making it difficult to understand what features are responsible for predictions.⁴
- Vulnerability to Adversarial Examples: CNNs are susceptible to adversarial examples, which are carefully crafted inputs that cause the network to make incorrect predictions without any visible change to the image.⁴ This is a concern, especially in medical imaging, where robustness is critical.⁴
- Need for Large, Well-Annotated Datasets: Effective deep learning models require large amounts of labeled data to perform well.⁴ However, in the medical domain, building such datasets is costly, time-consuming, and may involve ethical and privacy issues.⁴ The lack of sufficient high-quality datasets limits the performance of CNNs in medical imaging.⁴
- Overfitting and Generalization Issues: Deep learning models, including CNNs, can overfit to small or limited datasets, leading to poor generalization.⁴ This is particularly problematic in medical imaging, where robust models are necessary for clinical use.⁴

References:

- geeksforgeeks (2020) Convolutional Neural Network (CNN) in Machine Learning, GeeksforGeeks. Available at: https://www.geeksforgeeks.org/convolutional-neural-network-cnn-in-machine-learning/.
- 2. Wikipedia Contributors (2019) *Convolutional neural network*, *Wikipedia*. Wikimedia Foundation. Available at: https://en.wikipedia.org/wiki/Convolutional_neural_network.
- 3. IBM (2021) *Convolutional Neural Networks*, *Ibm.com*. Available at: https://www.ibm.com/think/topics/convolutional-neural-networks.
- 4. Yamashita, R. *et al.* (2018) 'Convolutional Neural networks: an Overview and Application in Radiology', *Insights into Imaging*, 9(4), pp. 611–629. Available at: https://doi.org/10.1007/s13244-018-0639-9.